

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Map</i>		<i>8/18/00</i>
O.I.P.E. CLASSIFIER		<i>49</i>	<i>8/24/00</i>
FORMALITY REVIEW	<i>2AT</i>	<i>852</i>	<i>09-28-00</i>
RESPONSE FORMALITY REVIEW	<i>CH</i>	<i>60103</i>	<i>1-6-00</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
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